

2 PAC 61

2002 CAMPAIGN CONTRIBUTIONS AND EXPENSES**State of Nevada**

Nevada Medical Political Action Committee

Name (print)

Office (if applicable)

District (if applicable)

3660 Baker Lane #101 Reno, NV 89509 825-6788

Mailing Address (include city and zip code)

Telephone No.

E-Mail Address

Select Appropriate Box(es) ☐ CANDIDATE ☒ PAC ☐ BAG ☐ POL PRY ☐ IND EXP ☐ AMENDED☐ **Report #1 — Due August 27, 2002**

Office with a 2-year term Period: Jan. 5, 2001 — Aug. 22, 2002
 Office with a 4-year term Period: Dec. 20, 1998 — Aug. 22, 2002
 Office with a 6-year term Period: Dec. 6, 1996 — Aug. 22, 2002
BAGs only: Period: Dec. 7, 2000 — Aug. 22, 2002

☒ **Report #2 Due — October 29, 2002**

Period: Aug. 23, 2002 — Oct. 24, 2002

☐ **Report #3 Due — January 15, 2003**

Period: Oct. 25, 2002 — Jan. 3, 2003

BAGs only: Period: Oct. 25, 2002 — Dec. 5, 2002**BALANCE**

This figure should reflect the balance shown on your last Disposition of
 Unspent Contributions Report, or last Contributions & Expenses Report, if any \$13,300

CONTRIBUTIONS SUMMARY

"Contribution" means a gift, loan, conveyance, deposit, payment, transfer or distribution
 of money or anything of value other than the services of a volunteer received. (NRS 294A.007)

- | | |
|--|---------------|
| 1. Total amount of monetary contributions in excess of \$100 | <u>\$ 625</u> |
| 2. Total amount of monetary contributions of \$100 or less | <u>8,700</u> |
| Actual number of monetary contributions of \$100 or less <u>105</u> | |
| 3. Interest and income earned on contributions, if any | <u>0</u> |
| 4. TOTAL AMOUNT OF ALL MONETARY CONTRIBUTIONS (add lines 1 through 3) | <u>9,325</u> |
| 5. Total amount of In Kind Contributions | <u>0</u> |

EXPENSES SUMMARY

- | | |
|---|----------------|
| 6. Total amount of monetary expenses in excess of \$100 | <u>\$8,950</u> |
| 7. Total amount of monetary expenses of \$100 or less | <u>0</u> |
| 8. Expense for filing fee | <u>0</u> |
| 9. TOTAL AMOUNT OF ALL MONETARY EXPENSES (add lines 6 through 8) | <u>8,950</u> |
| Remaining Balance (Subtract line 9 from 4) | <u>375</u> |
| 10. Total amount of In Kind Expenses | <u></u> |

AFFIRMATION

I declare under penalty of perjury that the foregoing is true and correct.

Signature

Lawrence P. Mathis

10/25/2002

Date Executed On